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<b>UTILITY</b> <b>PATENT APPLICATION</b> <b>TRANSMITTAL</b> Only for new nonprovisional applications under 37 C.F.R. § 1.53(b)		<b>Attorney Docket No.</b> 705789US2	
		<b>First Inventor or Application Identifier</b> Grigory Yezersky, Nashat Kamal Abdel Jalil, Gerald Cilibrasie and Stephen J. Buckley	
		<b>Title</b> Key Fob with Remote Control Functions	
		<b>Express Mail Label No.</b> EV026310279US as deposited on: <u>1/28/2004</u>	
<b>APPLICATION ELEMENTS</b> See MPEP Chapter 600 concerning utility patent application contents.		<b>ADDRESS TO:</b> MS Patent Application Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450	

1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)  2. <input checked="" type="checkbox"/> Specification [Total Pages <u>11</u> ] (preferred arrangement set forth below) -Descriptive title of the Invention -Cross References to Related Applications -Statement Regarding Fed Sponsored R&D -Reference to Microfiche Appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claims(s) -Abstract of the Disclosure  2A. <input checked="" type="checkbox"/> Preliminary Amendment: Please insert the following sentence prior to the first line of the specification of the application: This application claims the benefit of U.S. Provisional Application Serial No. 60/469,232, filed May 9, 2003.  3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>2</u> ]  4. Oath or Declaration [Total Pages <u>2</u> ] a. <input checked="" type="checkbox"/> Unsigned b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63 (d)) (for continuation/divisional with Box 16 completed)  i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u>  Signed statement attached deleting inventor(s) Named in the prior application, see 37 C.F.R. § 1.63(d)(2) and 1.33 (b).  <b>*NOTE FOR ITEMS 1 &amp; 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).</b>	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)  6. Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies  <b>ACCOMPANYING APPLICATION PARTS</b>  7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))  8. <input type="checkbox"/> 37 C.F.R. § 3.37(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)  9. <input type="checkbox"/> English Translation Document (if applicable)  10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations  11. <input type="checkbox"/> Preliminary Amendment  12. <input checked="" type="checkbox"/> Return Receipt Postcard MPEP 503)  13. <input type="checkbox"/> Statement (s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired (PTO/SB/09-12)  14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)  15. <input type="checkbox"/> Other:
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16. If a <b>CONTINUING APPLICATION</b> , Check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. _____ Prior application information: Examiner _____ <b>FOR CONTINUATION OR DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.					
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<b>17. CORRESPONDENCE ADDRESS</b>					
<input type="checkbox"/> Customer Number or Bar Code Label <b>24938</b> or <input checked="" type="checkbox"/> Correspondence address below (Insert Customer No. or Attach bar code label here)					
Name	Edwin W Bacon Jr.				
	DaimlerChrysler Intellectual Capital Corporation				
Address	CIMS 483-02-19				
	800 Chrysler Drive				
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Name (Print or Type)	Edwin W Bacon Jr.	Registration No.	39,098
Signature		Date	<u>1/28/04</u>

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**FEE TRANSMITTAL****For FY 2001**

Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

**Complete if Known**

Application Number	
Filing Date	
First Named Inventor	Grigory Yezerky
Examiner Name	
Group / Art Unit	
Attorney Docket No.	705789US2

**TOTAL AMOUNT OF PAYMENT** (\$) **770****METHOD OF PAYMENT (check one)**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 03-1800  
Deposit Account Name DaimlerChrysler Intellectual Capital Corporation

- ☒ Charge Any Additional Fee Required Under  
37 CFR 1.16 and 1.17

2. ☐ Payment Enclosed:  
☐ Check ☐ Money Order ☐ Other

**FEE CALCULATION**

1. BASIC FILING FEE				
Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description
1001	2001	770	385	Utility filing fee
				<b>Fee Paid</b> <u>770</u>
1002	2002	340	170	Design filing fee
1003	2003	530	265	Plant filing fee
1004	2004	770	385	Reissue filing fee
1005	2005	160	80	Provisional filing fee
<b>SUBTOTAL (1)</b>				<u>770</u>

**2. EXTRA CLAIM FEES**

Total Claims	Extra Claim	Fee from below	Fee Paid
<u>15</u>	-20** = <u>0</u>	X <u>0</u>	= <u>0</u>
Independent Claims <u>3</u>	- 3** = <u>0</u>	X <u>0</u>	= <u>0</u>
Multiple Dependent		<u>290</u>	= <u>0</u>

\*\*or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description
1202	2202	18	9	Claims in excess of 20
1201	2201	86	43	Independent claims in excess of 3
1203	2203	290	145	Multiple dependent claim, if not paid
1204	2204	86	43	** Reissue independent claims over original patent
1205	2205	18	9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$) **0****FEE CALCULATION (continued)**

3. ADDITIONAL FEES					Fee Description	Fee Paid
Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	
105	130	205	65		Surcharge-late filing fee or oath	
127	50	227	25		Surcharge-late provisional filing fee or cover sheet	
139	130	139	130		Non-English specification	
147	2,520	147	2,520		For filing a request for examination	
112	920*	112	920*		Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*		Requesting publication of SIR after Examiner action	
115	110	215	55		Extension for reply within first month	
116	390	216	195		Extension for reply within second month	
117	890	217	445		Extension for reply within third month	
118	1,390	218	695		Extension for reply within fourth month	
128	1,890	228	945		Extension for reply within fifth month	
119	310	219	155		Notice of Appeal	
120	310	220	155		Filing a brief in support of an appeal	
121	270	221	135		Request for oral hearing	
138	1,510	138	1,510		Petition to institute a public use proceeding	
140	110	240	55		Petition to revive – unavoidable	
141	1,240	241	620		Petition to revive – unintentional	
142	1,240	242	620		Utility issue fee (or reissue)	
143	440	243	220		Design issue fee	
144	600	244	300		Plant issue fee	
122	130	122	130		Petitions to the Commissioner	
123	50	123	50		Petitions related to provisional applications	
126	180	126	180		Submission of Information Discl. Stmt.	
581	40	581	40		Recording of each patent assignment per property (times number of properties)	
146	710	246	355		Filing a submission after final rejection (37 CFR 1.129(a))	
149	710	249	355		For each additional invention to be examined (34 CFR 1.129(b))	
Other fee (specify) _____						
Other fee (specify) _____						
* Reduced by Basic Filing Fee Paid						
<b>SUBTOTAL (3)</b>						<b>(S) 0</b>

**SUBMITTED BY**

Typed or Printed Name

Edwin W Bacon Jr.

Signature

Date

1/28/04**Complete (if applicable)**

Reg. Number

39,098

Deposit Account User ID